

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101599,558

FILING DATE

10-2-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2	-		1			
3	2		1			
4			1			
5	8		1			
6	8		1			
7	-		1			
8	1		1			
9	0		1			
10	-		1			
11	-		1			
12	0		1			
13	0		1			
14	0		1			
15	0		1			
16	0		1			
17	-		1			
18	0		1			
19	-		1			
20	1		1			
21	-		1			
22	2		1			
23	0		1			
24	0		1			
25	-		1			
26	-		1			
27	0		1			
28	-		1			
29	-		1			
30	0		1			
31	0		1			
32	0		1			
33	-		1			
34	-		1			
35	0		1			
36	0		1			
37	1		1			
38	-		1			
39	2		1			
40	0		1			
41	-		1			
42	0		1			
43	0		1			
44	0		1			
45	0		1			
46	0		1			
47	0		1			
48	0		1			
49	0		1			
50	-		1			
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS		77				

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1					
52	0					
53	0					
54	0					
55	-					
56	0					
57	-					
58	0					
59	0					
60	1					
61	-					
62	2					
63	0					
64	0					
65	0					
66	0					
67	-					
68	-					
69	0					
70	0					
71	-					
72	-					
73	0					
74	0					
75	0					
76	0					
77	1					
78	1					
79	1					
80	1					
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS			4			